



Town of Dumfries 2012 Summer Adult Co-ed Kickball League Registration



Game Times: Saturday Evenings

Age: 18+

Levels: all!

Cost: \$25/player

Individual Registration: _____

Individuals will be placed on a team.

Team Registration (6-10 players) _____ **Team Name:** _____

No tryouts, everyone makes the team.

Team Name: _____ **Team Color:** _____

Team Captains are responsible for gathering team mate's information, signatures, and team payment. Team payment is due by May 8th. Games will be played on Saturday evenings between 5pm-8pm, beginning May 12, 2012 and will conclude on June 30, 2012. Team captains will be the point of contact for all league information including game schedules, notifications, updates, rules and regulations, and any other important information. Teams are responsible for: their team shirts, bringing a ball to the game, keeping the fields clean, and working with their opponent to keep score of their games. Please note that a minimum of four teams will be needed to constitute a league.

Participation Agreement: The Town of Dumfries assumes no liability for injuries or damages from the results of participation. Due to the strenuous nature of some activities, the participant is urged to consult his/her physician. All activities present inherent risks and hazards which the participant assumes. I hereby approve of my participation in the program. To the best of my knowledge, there are no physical or other conditions which will interfere with my participation. I understand that photographs/video taken of programs may be used by the Town of Dumfries. The Town of Dumfries has my permission in an emergency to call Emergency 911 and/or send myself to a Hospital/Urgent care Facility and the Hospital and medical staff have my authorization to provide treatment which a Physician deems necessary for my well being.

Team Captain Name:	Signature:
Address:	
City: State: Zip:	
Home and/or Cell Phone:	
Email Address:	
Player Name:	Signature:
Address:	
City: State: Zip:	
Home and/or Cell Phone:	
Email Address:	
Player Name:	Signature:

Address:	
City: State: Zip:	
Home and/or Cell Phone:	
Email Address:	
Player Name:	Signature:
Address:	
City: State: Zip:	
Home and/or Cell Phone:	
Email Address:	

Player Name:		Signature:	
Address:			
City: State: Zip:			
Home and/or Cell Phone:			
Email Address:			
Player Name:		Signature:	
Address:			
City: State: Zip:			
Home and/or Cell Phone:			
Email Address:			
Player Name:		Signature:	
Address:			
City: State: Zip:			
Home and/or Cell Phone:			
Email Address:			
Player Name:		Signature:	
Address:			
City: State: Zip:			
Home and/or Cell Phone:			
Email Address:			
Player Name:		Signature:	
Address:			
City: State: Zip:			
Home and/or Cell Phone:			
Email Address:			
Player Name:		Signature:	
Address:			
City: State: Zip:			

Home and/or Cell Phone:

Email Address: